(D) 403117

FORM 3

FE5AN018

REPORT OF RECEIPTS

For An Authorized Committee

RECEIVED

PREMIATION DE LOGE

			·			G-GRACHIM NA I-UP	
1. NAME OF COMMITTEE (In full)	TYPE OR PRIN	T ▼	Example: If typin over the lines.	g, type	12FE4M5 F	C MAIL CENTER	
DUICINIYI TIRIAIC	HITIENBLE	FIRIGI IFIO	1R1 16101N16	1RIEISISI	1111		
ADDRESS (number and street)	لللكللة	LIEMPH	IRIEL ILIAIN	<u> 15111</u>			
Check if different than previously reported. (ACC)							
	NIBIEIT	TIMIES IDIA		با لبب	MD 20	181521-1111	
2. FEC IDENTIFICATION I	NUMBER 🔻	CITY	\	S	TATE A	ZIP CODE A STATE ▼ DISTRICT	
C 60 50 53	96	3. IS THIS REPORT	V ,	OR	AMENDED (A)	MA 6	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2)		(b) 12-Day F	PRE-Election Repo		General (12G)	Runoff (12R)	
			Convention (12C)	Special (12S)	N.	
	October 15 Quarterly Report (Q3)		м м <i>i</i>	, p p ,	Y Y Y	in the State of	
January 31 Year-End Report (YE)		(c) 30-Day POST-Election Report for the:					
			General (300	i)	Runoff (30R)	Special (30S)	
Termination Report (TER)		Election		, 0 0 ,	Ý Y Y Y	in the State of	
5. Covering Period	0 0 1	, Σ 0 1 3 <u>,</u>	through	"1 "2	′ 3 L ′ Š	013	
I certify that I have examined Type or Print Name of Treasur		_	y knowledge and N TEN B.ENG		, correct and co	mpiete.	
Signature of Treasurer Date Date Date							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.							
Office Use Only					F	FEC FORM 3 (Revised 02/2003)	